

# PURCHASE REQUEST FORM

Complete this form for all purchases of goods & services that do not qualify for direct pay processes via check request, reimbursement, P-Card, STLS, or other methods R U

Z K H Q W K H U D Q W H Q R W L Q J D S S U R Y D O S U R F H V V Z K H U H W K H 3 , D

Instructions: For institute or trust accounts, substitute "Program" or "Principal Investigator" with "Account" or "Account Holder".

How to submit completed form: Complete fields below and attach any quotations, budgets, or other pertinent information

Submit Forms to Research and Sponsored Programs: R U V S # F V X H D V W E D \ H G X

1. Program Name \_\_\_\_\_  
 Principal Investigator/Dept \_\_\_\_\_  
 Delivery Address \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 Program Chartfield \_\_\_\_\_

Account	Fund	Dept ID	Program	Class	Project
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2. Item Type                      Equipment                      Good                      Service                      Subcontract                      Other

3. Requested Vendor \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 Telephone/Fax/Email \_\_\_\_\_  
 Website \_\_\_\_\_

4. Requested Item(s) Describe item or service. Include manufacturer, model #, size, color, or other pertinent specifications and attach vendor quote for each item. For services, attach a complete statement of work specifying deliverables and due dates

		Qty	Unit Price	Total
1.				
2.				
3.				
4.				
5.				
<b>Purchase Order Total (before tax &amp; shipping)</b>				

5. Required Delivery Date (enter due date for item delivery or period for provision of services) \_\_\_\_\_

6. Program Benefit If item(s) is/are not specifically identified in approved budget, explain how this purchase benefits the program:

7. Sole Source Provide D E U L H I G W V F H R S W B R C cannot be considered for this procurement , I F R V W V H [ F H H G \ R X Z  
 W R D O V R F R P S O H W H W K L V I R U P K W W S V Z Z F V X H D V W E D \ H G X S U R F X U 0 S O u 0 S O u q

8. Required Quotes , I Purchase order total below \$5,000: attach one written price quote from vendor R U V W D W H P H Q W R I Z R U N

, purchase order total Between \$5,000 - \$49,999: attach three written price quotes from three different vendors R U  
 D W W D F K D Q D J U H H P H Q W R U V L J Q H G V W D W H P H Q W G H W D L O L Q J F R V W V D Q G D V V R F L

, I purchase order total \$50,000 or greater, do not obtain price quotes . The University will handle the solicitation process pursuant to open competition requirements X Q O H V V D - X V W L I L F D W L R Q I R U 6 R O H 6 R X U F H R U 6 R

PI Signature/Approval	Date	ORSP Signature /Approval	Date
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